

## PART B - FEE(S) TRANSMITTAL

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20350 7590 03/24/2004

TOWNSEND AND TOWNSEND AND CREW, LLP  
 TWO EMBARCADERO CENTER  
 EIGHTH FLOOR  
 SAN FRANCISCO, CA 94111-3834



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## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Karen Karlin	(Depositor's name)
<i>Karen Karlin</i>	(Signature)
5-25-04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/855,153	05/14/2001	Robert E. Reiter	30435.69USD1	1003

TITLE OF INVENTION: PSCA: PROSTATE STEM CELL ANTIGEN AND USES THEREOF

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	06/24/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
HELMES, LARRY RONALD	1642	530-300000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Townsend and Townsend  
and Crew LLP  
2  
3

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Agensys, Inc.  
 The Regents of the University  
 of California

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Santa Monica, California  
 Oakland, California

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies 10

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.

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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

*Annette S. Parent* (Date) 5/24/03

Annette S. Parent, Reg. NO. 42,058

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06/02/2004 CNGUYEN1 00000011 201430 09855153

01 FC:2501  
 02 FC:1504  
 03 FC:8001

665.00 DA  
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